DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: IVY COURT (0009649)

Address: 442 RIVER DR, BLACK RIVER FALLS, WI 54615

License Status: REGULAR

Licensed/Certified/Registered 12/01/2002

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0094147 End Date: 01/19/2005 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009727 Served 02/14/2005

Deficiencies Cited Subject Area Subject Area Subject Area Corrected

88.04(5)(a) TRAINING-15 HOURS WITHIN 6 MONTHS

88.07(2)(a) SERVICES

88.10(3)(1) SAFE PHYSICAL ENVIRONMENT

Survey ID: 0091655 End Date: 08/19/2003 Type: OTHER Purpose: VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

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